

AVAILBLE COPY

MULTIPLE DEPEN CLAIM FEE CALCULATION SHEET (FOR USE WITH FEE SCHEDULE XTO-875)						SERIAL NO. 14-000000000000000000	FILING DATE						
						APPLICANT(S)							
CLAIMS													
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1							51					
2	C	C						52					
3		1						53					
4		1						54					
5		1						55					
6		1						56					
7		1						57					
8		1						58					
9		1						59					
10		1						60					
11		1						61					
12		1						62					
13		1						63					
14		1						64					
15		1						65					
16		1						66					
17	C	C						67					
18		1						68					
19	C	C						69					
20		1						70					
21		1						71					
22		1						72					
23		1						73					
24		1						74					
25		1						75					
26		1						76					
27		1						77					
28		1						78					
29		1						79					
30		1						80					
31		1						81					
32		1						82					
33		1						83					
34		1						84					
35		1						85					
36		1						86					
37		1						87					
38		1						88					
39		1						89					
40		1						90					
41		1						91					
42		1						92					
43		1						93					
44		1						94					
45		1						95					
46		1						96					
47		1						97					
48		1						98					
49		1						99					
50		1						100					
TOTAL IND.	6		↓		↓			TOTAL IND.		↓			
TOTAL DEP.	15	←	←	←	←	←		TOTAL DEP.		←	←	←	←
TOTAL CLAIMS	21	[REDACTED]		[REDACTED]	[REDACTED]	[REDACTED]		TOTAL CLAIMS		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]